FORM D



Provider of web-based software.

Actual or Estimated Date of Incorporation or Organization:

Type of Business Organization

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

EODH D	hours per	response 16.00
FORM D	SE	C USE ONLY
NOTICE OF SALE OF SECURITIES	Prefix	Serial
PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION		E RECEIVED

THOMSON REUTERS

Expires: **July 31, 2008**

Estimated average burden

(check if this is an amendment and name has changed, and indicate change.) Name of Offering SEC Sale of Series A-1 Preferred Stock Wall Processing Rule 506 □ Section 4(6) ☐ Settion Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 Amendment New Filing Type of Filing: AUG 052008 A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Washington, DC (check if this is an amendment and name has changed, and indicate change.) Name of Issuer 101 iContact Corporation (f/k/a Broadwick Corporation) Telephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) (919) 433-0735 2635 Meridian Parkway, Durham, NC 27713 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Same as above. (if different from Executive Offices) Same as above. **Brief Description of Business PROCESSED**

GENERAL INSTRUCTIONS

Dusiness trust

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Year

2003

CN for Canada; FN for other foreign jurisdiction)

Month

07

other (please specify):

Actual

Estimated

D

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When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

☐ limited partnership, already formed

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

limited partnership, to be formed

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1.2	A. BASIC I	DENTIFICATION DATA		
 Each promoter of the issuer, if the seach beneficial owner having the Each executive officer and directions. 	he issuer has been organized wit e power to vote or dispose, or dir stor of corporate issuers and of co	ect the vote or disposition of, 1	0% or more of a class partners of partners	s of equity securities of the issuer ip issuers; and
2. Enter the information requested for the following: Each permoter of the insular if the issuer is and increase of corporate issuers and of corporate general and managing partners of partnership issuers.		General and/or Managing Partner		
2. Eiter the information requested for the following:				
Allis, Ryan P.M.			<u> </u>	
Business or Residence Address (N	Number and Street, City, State, Z	ip Code)		
c/o iContact Corporation, 2635 I	Meridian Parkway, Durha	m, NC 27713		
Check Box(es) that Apply: Promote	er 🛛 Beneficial Owner			
Full Name (Last name first, if individual)				
Business or Residence Address (N	lumber and Street, City, State, Z	ip Code)		
c/o iContact Corporation, 2635 I	Meridian Parkway, Durha	m, NC 27713		
Check Box(es) that Apply:	er 🛛 Beneficial Owner	☐ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
•	· -	p Code)		
2635 Meridian Parkway, Durham	, NC 27713			
Check Box(es) that Apply: Promote	er Beneficial Owner	☐ Executive Officer	☑ Director	
Business or Residence Address (N	lumber and Street, City, State, Zi	p Code)		
Updata Partners III, L.P., Two Fr	eedom Square, 11955 Fre	eedom Drive, Suite 7000), Reston, Virgin	ia 20190
Check Box(es) that Apply: Promote	r . 🛛 Beneficial Owner	☐ Executive Officer	☐ Director	_
Full Name (Last name first, if individual)				
Updata Partners III, L.P.				
Business or Residence Address (N	umber and Street, City, State, Zi	p Code)		
379 Thornall Street, Edison, NJ (08837			
Check Box(es) that Apply: Promote	r 🔲 Beneficial Owner	☐ Executive Officer	Director	
Full Name (Last name first, if individual)				
Business or Residence Address (N	umber and Street, City, State, Zij	p Code)		
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	☐ Director	
Full Name (Last name first, if individual)				
Business or Residence Address (N	umber and Street, City, State, Zip	Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	eg persone stronger - an entre persone, see pe			В	. INFORMA	TION ABOU	T OFFERI	NG		very .		
1. Has the i	ssuer sold	, or does the	issuer inter	nd to sell, to	non-accred	ited investo	rs in this off	ering?	The come -		Yes	No ⊠
								nder ULOE.			 .	
2. What is t	he minimu	m investmer	nt that will be	e accepted f	rom any ind	ividual?					\$ <u>n/a</u>	
											Yes	No
3. Does the											\boxtimes	
or similar re	emuneration iated personation ealer. If mo	n for solicita on or agent o re than five	tion of purch of a broker o (5) persons	nasers in cor r dealer regi	nnection wit stered with	h sales of so the SEC an	ecurities in t d/or with a s	he offering. state or state	ectly, any cor If a person to es, list the na Ier, you may	me of the	N/A	
Full Name (Last name	first, if indiv	ridual)							, <u>.</u>		
Business or	Residenc	e Address (l	Number and	Street, City	State, Zip	Code)						
Name of As	sociated B	roker or De	aler									
States in W		n Listed Ha			Solicit Purc	hasers			☐ All S	tates		
[AL]	[AK]	(AZ)	[AR]	(CA)	(CO)	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[AM]	[MI]	(MN)	(MS)	[MO]
[MT]	[NE] [SC]	(NV) (SD)	(NH) (TN)	[NJ] [TX]	[NM] [UT]	[VV] [VT]	[NC] [VA] -	[ND] [WA]	(OH) [WV]	[OK]	(OR) (WY)	[PA] [PR]
[RI]	[30]	[30]	[TIN]	[[]	[01]	[41]	[474].	[4474]	(***)		(** -)	[· · ·]
Full Name (Last name	first, if indiv	idual)									
Business or	Residence	e Address (1	Number and	Street, City,	State, Zip	Code)						
Name of As	sociated B	roker or Dea	aler									
States in W		n Listed Has			Solicit Purc	nasers			☐ All S	tates		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[HN]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	(SD)	[TN]	[ТХ]	[UT]	[VT]	[AV]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name	first, if indiv	idual)									
Business or	Residence	e Address (N	Number and	Street, City,	State, Zip	Code)				-		
Name of As	sociated B	roker or Dea	aler	·								
States in W (Chec		n Listed Has s" or check			Solicit Purcl	nasers			All States			
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[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſRII	(SC)	(SD)	[TN]	ΠXI	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)

 Enter the aggregate offering price of securities included in this offering and the total amount alrea sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this boand indicate in the columns below the amounts of the securities offered for exchange and already exchanged. 	x .		
Type of Security		Aggregate Offering Price	Amount Already Sold
Debt		\$	\$
Equity		\$3,000,005.34	\$3,000,005.34
☐ Common ☒ Preferred			
Convertible Securities (including warrants)		\$	\$
Partnership Interests		\$	\$
Other (Specify).		\$	\$
Total		\$3,000,005.34	\$3,000,005.34
Answer also in Appendix, Column 3, if filing under ULOE.		, ,	
2. Enter the number of accredited and non-accredited investors who have purchased securities in th offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate number of persons who have purchased securities and the aggregate dollar amount of their purchas the total lines. Enter "0" if answer is "none" or "zero."	the		Aggregate
Accredited Investors		Number Investors	Dollar Amount
Non-accredited Investors		0	\$ 0
Total (for filings under Rule 504 only)			\$0
Answer also in Appendix, Column 4, if filing under ULOE.			
3. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securitisold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first of securities in this offering. Classify securities by type listed in Part C-Question 1.			
Type of offering		Type of Security	Dollar Amount - Sold
Rule 505			\$0
Regulation A			\$0
Rule 504			\$0
Total			\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the secu in this offering. Exclude amounts relating solely to organization expenses of the issuer. The informati may be given as subject to future contingencies. If the amount of an expenditure is not known, furnis estimate and check the box to the left of the estimate.	on		
Transfer Agent's Fees		\$0	
Printing and Engraving Costs		\$0	
Legal Fees	\boxtimes	\$4,500.00	
Accounting Fees		\$0	
Engineering Fees		\$0	
Sales Commissions (specify finders' fees separately)	П	\$ 0	

Other Expenses (identify) securities filing fees.....

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

\$600

\$5,100.00

 \boxtimes

expenses furnished in response to Part C - Ques issuer."	\$2,994,905.34		
5. Indicate below the amount of the adjusted grosused for each of the purposes shown. If the amount of the left of the estimate and check the box to the left of the esting the adjusted gross proceeds to the issuer set for	unt for any purpose is not known, f nate. The total of the payments list	urnish an ted must equal	
Salaries and fees Purchase of real estate Purchase, rental or leasing and installation and equipment Construction or leasing of plant buildings and Acquisition of other businesses (including	n of machinery	Payments to Officers, Directors, & Affiliates	Payments To Others \$ \$ \$ \$ \$ \$ \$
securities involved in this offering that ma exchange for the assets or securities of a pursuant to a merger)	y be used in nother issuer	\$	□ \$
Repayment of indebtedness		\$ \$ \$	□ \$ ⊠ \$2,994,905.34 □ \$
Column Totals Total Payments Listed (column totals add		□ \$ □ \$0.00	☐ \$ ⊠ \$2,994,905.34 ⊠ \$2,994,905.34
	D. FEDERAL SIGNATURE	Ē	
The issuer has duly caused this notice to be signed by signature constitutes an undertaking by the issuer to fundation furnished by the issuer to any non-accredit	irnish to the U.S. Securities and Ex	change Commission, upon writt	
Issuer (Print or Type)	Signature	Da	
iContact Corporation	JW C		July <u>30,</u> 2008
Name of Signer (Print or Type)	Fitte of Signer (Print or Type	e) /	
Γim Oakley	Secretary	,	
	ATTENTION		
Intentional misstatements or omi		criminal violations. (See 18 U.	S.C. 1001.)

	E. STATE SIGNATURE			
	resently subject to any of the disqualification provisions of	such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		_	
. The undersigned issuer hereby undertakes (39,500) at such times as required by state la	to furnish to any state administrator of any state in which the	nis notice is filed, a not	ice on Fo	rm D (17 CF
. The undersigned issuer hereby undertakes	to furnish to the state administrators, upon written request,	information furnished	by the iss	uer to offere
. The undersigned issuer represents that the exemption (ULOE) of the state in which this nate in the state in which the stablishing that these conditions have been s	issuer is familiar with the conditions that must be satisfied otice is filed and understands that the issuer claiming the a satisfied.	to be entitled to the Ur vailability of this exemp	iform limi ption has	ited Offering the burden o
he issuer has read this notification and know uly authorized person.	s the contents to be true and has duly caused this notice to	be signed on its beha	If by the u	ındersigned
ssuer (Print or Type)	Signature	Date		
iContact Corporation	hely	نِّ July	<u>79</u> , 2008	3
lame of Signer (Print or Type)	Title of Signer (Print or Type)			
im Oakley	Secretary			
M. 1			·	
		-		
	•			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

 		 	
	APPENDIX		

1		2	3			4	<u> </u>	5	<u> </u>
and a few managements of the state of the st	Intend to sell to non-accredited investors in State (Part B-Item 1)		-accredited and aggregate ors in State offering price		Type of investor and amount purchased in State (Part C-Item 2)				
			Convertible Promissory	Number of Accredited		Number of Non-Accredited	de construction de la constructi		
State	Yes	No	Note	Investors	Amount	Investors	Amount	Yes	No
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1		2	3	5							
	to non-a	to sell ccredited in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Convertible Promissory Note	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NJ		Х	\$2,800,002.50	1	\$2,800,002.50	0	\$0.00	-	X		
NM								The second secon	÷		
NY											
NC		Х	\$200,002.84	1	\$200,002.84	0	\$0.00		X		
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